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APPLICANTS

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** CONTINUING DATA *****
 This application is a DIV of 09/605,246 06/28/2000 PAT 6,926,309

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 08/30/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>J.B.</i> Initials	STATE OR COUNTRY NY	SHEETS DRAWING 8	TOTAL CLAIMS 2	INDEPENDENT CLAIMS 1
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ADDRESS

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TITLE

Modification of receiver surface to reject stamp cancellation information

FILING FEE	FEES: Authority has been given in Paper. No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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